Dealing with Inconsistency of Self-Perceived Health Changes in Pre- and Post-Deployment Health Assessment

2nd of 7 Presentations for DEEP Update

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Self-Perceived Health Changes In Preand Post-Deployment Health Assessment

- There are two ways to obtain the self-perceived health changes from pre- and post-health assessment questionnaires (DD Form 2795/2796).
- 1. Direct measure
- 2. Indirect measure

Two Methods to Determine Health Change During Deployment

Direct Method

Please answer all questions in relation to THIS deployment

1. Did your health change during this deployment?

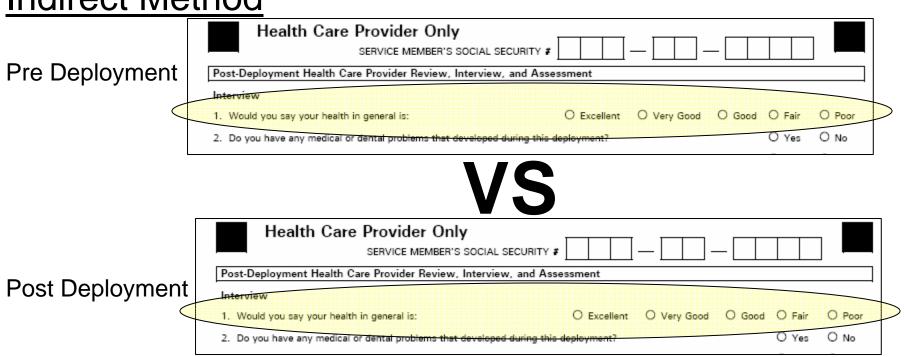
O Health stayed about the same or got better
O Health got worse

Please answer all questions in relation to THIS deployment

4. Did you receive any vaccinations just before or during this deployment?

O Smallpox (leaves a scar on the arm)
O Anthrax

Indirect Method



The Direct Measure

- Use question #1 from DD Form 2796 (self-administered questionnaire)
- Did your health change during this deployment?
 - Health stayed about the same or got better
 - Health got worse

The Indirect Measure

 Calculate the difference in answering the same question (interviewed by a health care provider) in pre- and post-deployment health assessment (DD Form 2795 and 2796).

Would you say your health in general is:

- Excellent
- Very Good
- Good
- Fair
- Poor

The Indirect Measure (Cont'd)

- Classify the changes in self-rated overall health status from pre- to post-deployment into two categories:
- 1. Health status stayed the same or better (example: from "Fair" in pre-deployment to "Good" in post-deployment)
- 2. Health status got worse (example: from "Good" in pre-deployment to "Fair" in post-deployment)



• The direct and indirect measures of self-perceived health changes during deployment are consistent.



DD form 2795 and 2796 were obtained from AMSA for about 600 service members with records indicating deployment to Afghanistan from December 2001 to December 2003.

Comparison between the Direct and Indirect Measures

Self-Perceived Health Changes		Direct Measure		Total	
		Same/Better	Worse		
Indirect Measure	Same/Better	291(49%)	30 (5%)	321 (54%)	
	Worse	178 (30%)	98 (16%)	276 (46%)	
Total		469 (79%)	128 (21%)	597 (100%)	

Comparison Summary

- Health got worse:
 By direct measure, 21%
 By indirect measure, 46%
- Consistent cases, 65%
- Inconsistent cases, 35%

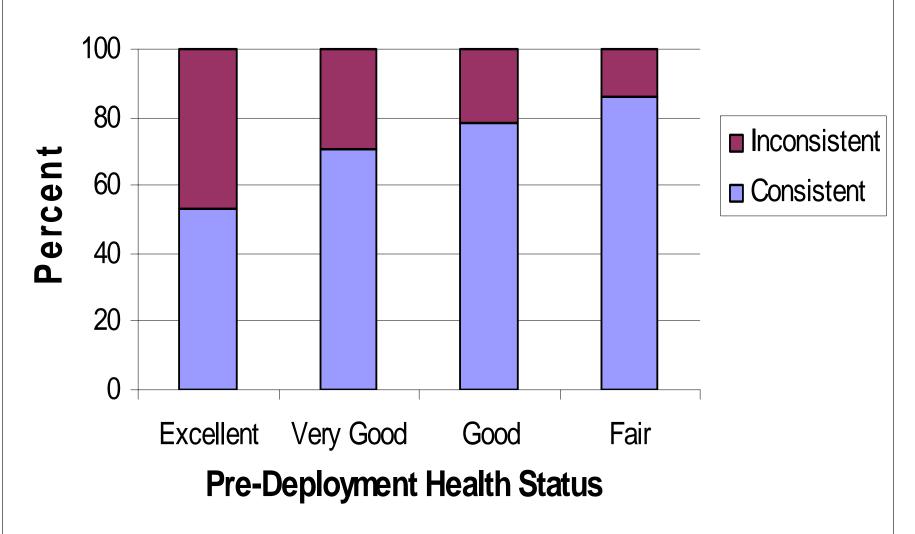


With the substantial discrepancy in percentages of the self-perceived declining health status between the direct and indirect measures, which one should be used as a health outcome?

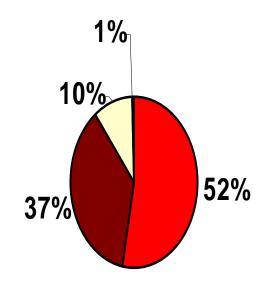
Evaluation of Respondent Inconsistency

- Top ranked factors contributing the respondent inconsistency, determined by a CART model with inconsistent status (Yes/No) as a dependent variable.
 - Pre-deployment self-rated health status (baseline)
 - Deployment duration
 - Pay Grade
 - Exposure indices (1st and 2nd orders)
 - Mental stress index
 - Education levels
 - Age
 - Component (active, reserve and guard)

Inconsistency of Self-Reported Health Changes by Pre-Deployment Health Status



Proportion of Inconsistent Cases of Self-Reported Health Changes by Pre-Deployment Health Status



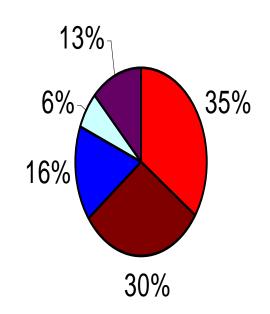






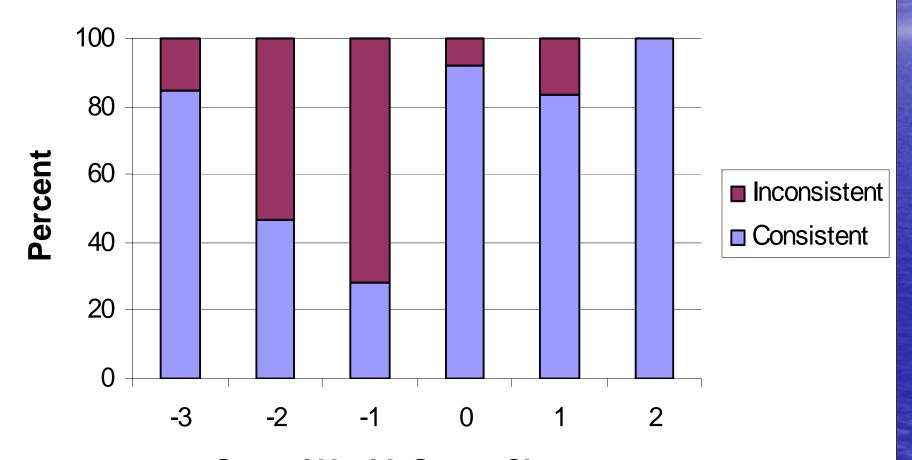


Proportion of Inconsistent Cases by Types of Health Status Changes from Pre- to Post-Deployment



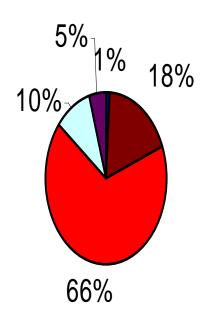


Inconsistency of Self-Reported Health Changes by Step of Health Status Changes

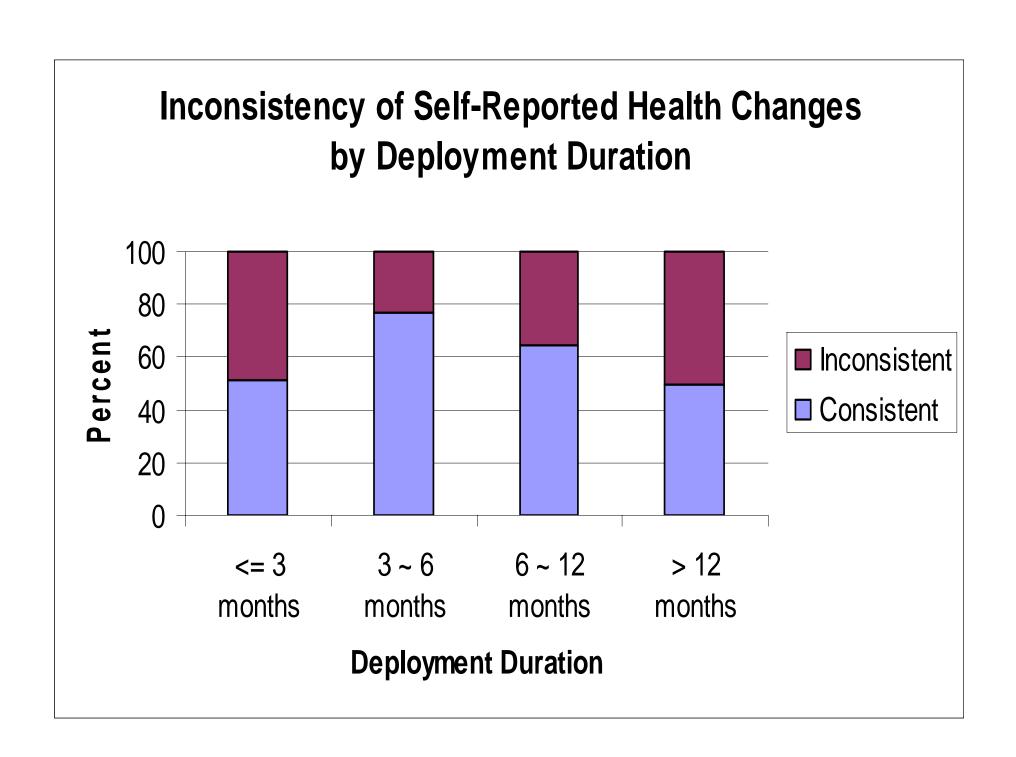


Step of Health Status Changes

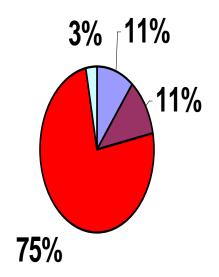
Proportion of Inconsistent Cases by Step of Health Status Change







Proportion of Inconsistent Cases of Self-Reported Health Changes by Deployment Duration



- <= 3 months</p>
- \blacksquare 3 ~ 6 months
- 6 ~ 12 months
- □ > 12 months

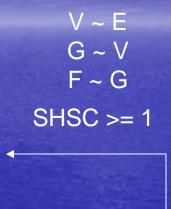
Incorporating Inconsistency of Self-Perceived Health Changes in Modeling

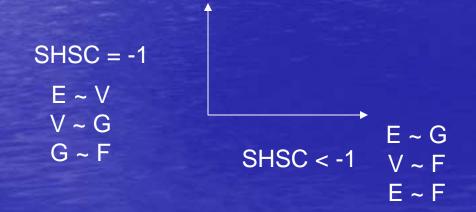
- Independent variables
 - Exposure indices (1st and 2nd orders)
 - Mental stress index
 - Post-deployment self-rated health status
 - Deployment duration
 - Pay Grade
 - Education levels
 - Age
 - Component (active, reserve and guard)
 - Sex
 - Race
 - Marital status

- Outcome types
 - Direct measure
 - Indirect measure
 - An unsure category
 - Delete unsure cases
 - Intelligent allocation

Intelligent Allocation of Inconsistent Cases by Step of Health Status Change (SHSC)

	Self-Perceived Health Changes		Direct Measure			
The Selfer			Same/	Better'	Worse	
MINESTER STATES	Indirect Measure	Same/Better	291	-		30
A STATEMENT OF		Worse	178			98







Comparison of the CART Models Using Different Types of Outcomes

Outcome Types	Health Change	Cases	Misclassed (%) Learn data	Misclassed (%) Test data
Direct measure	neasure Same/better		22.0	23.4
	Worse	136	23.5	31.6
Indirect measure	Same/better	322	25.5	29.2
	Worse	282	16.7	19.5
An unsure category	Same/better	291	14.8	14.8
	Unsure	208	57.2	56.7
	Worse	98	39.8	42.9
Delete unsure cases	Same/better	291	14.8	14.8
	Worse	98	16.3	16.3
Intelligent allocation	Same/better	430	25.2	25.2
	Worse	157	14.7	14.7

"True" Percentage of Self-Perceived Declining Health Change

- The "true" percentage obtained by only using the consistent cases is 25.2% (compared with 26.3% by the intelligent allocation).
 - The direct measure of 21% is about 4% under reported.
 - The indirect measure of 46% is about 20% over reported.

Recommendations

- Avoid to use the indirect measure of selfperceived declining health change as an outcome (largely over reported and highly inconsistent).
- Be cautious to use the direct measure of self-perceived declining health change as an outcome (under reported and inconsistent).



- Identify and evaluate inconsistent cases
- Incorporate inconsistency of self-perceived declining health changes in data analysis and modeling (the intelligent allocation approach).

Two Different Questions

• Are percentages of "health got worse" equal between the direct and indirect measures? • Are the direct and indirect measure consistent?

